6. 2nd ACP to the LDCs working under CGHS, Delhi is to be revised in the light of the DOPT's guidelines, but no one is bothering about it.

7. Hundreds of promotional posts are lying vacant though filling up of promotional posts do not fall under the purview of ban etc.

Awareness for TB Control

1268. SHRI VIJAY J. DARDA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that four out of every ten Indians are infected by mycobacterium tuberculosis and five to ten per cent of them finally get the disease;

(b) if so, the steps taken to arrest the spread of tuberculosis especially when it is highly infectious and being airborne the bacteria cut across all age groups and socio-economic barriers; and

(c) whether Government propose to launch any special drive with a view to educating masses about the preventive and curative aspects of tuberculosis specially in tribal, adivasi and backward areas like Yavatmal in Maharashtra?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) Yes, Sir.

(b) To control the disease, the National TB Control Programme has been in operation in the country since 1962. The Revised National TB Control Programme (RNTCP) based on DOTS, which is a WHO recommended strategy, was launched in 1993 and is being implemented in a phased manner, with the objective of achieving cure rate of 85% of new sputum positive cases. Diagnosis by sputum microscopy instead of by X-ray helps in detecting and curing infectious cases on priority. Facilities for diagnosis by sputum microscopy have been decentralized and strengthened. Drugs are provided free of cost in patient-wise boxes and patients are monitored so that they complete their treatment. The project districts have reported a cure rate of more than 80% which means more that 8 out of every 10 patients diagnosed and put on treatment under revised strategy are successfully treated. This is double

that of the earlier programme. The death rates have also reduced from 29% to 4%. DOTS coverage is being rapidly expanded in the country. From 20 million coverage in 1998, about 760 million population has been covered at present. It is envisaged to cover 850 million population by 2004 under the revised strategy and the entire population of the country by 2005.

(c) IEC activity, is one of the important components of TB control strategy. Facts about TB and DO's and DON'Ts are published in the leading national newspapers from time to time. Similarly, State/Districts TB Societies also publish the same in the regional and local newspapers. IEC prototype material has been developed at the Central level and given to the State to translate into the local language. The Districts plan IEC activities as per local requirement and use locally available media to create awareness among the masses, including backward and tribal areas. Districts have been advised to ensure wall paintings in microscopy and DOT centres and at prominent places to convey the message that TB is fully curable if full course of treatment is taken and that all diagnosis and treatment facilities are provided free of cost. Bunds for undertaking IEC activities are provided under the programme.

Review of centrally sponsored health schemes

1269. DR. DASARI NARAYANA RAO: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have reviewed implementation of the centrally sponsored schemes for control of major diseases like malaria, TB, leprosy, blindness and AIDS in Andhra Pradesh and other Southern States;

(b) if so, the outcome of the review, State-wise; and

(c) the remedial measures taken in this regard?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRIMATI SUSHMA SWARAJ): (a) to (c) Information is being collected and will be laid on the Table of the House.